

The Importance of the Sleep Approach in Psychiatry

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COLUMN ARTICLE

Sleep disorders encompass a number of different diseases, including insomnia due to its high prevalence. Although insomnia is the most well-known and also diagnosed sleep disorder, there are also sleep disorders due to difficulties in staying asleep, falling asleep at inappropriate times, sleeping too much and abnormal behavior during sleep.

The prevalence of sleep disorders in developed societies continues to increase due to the pace of life so fast demanded by society today.

Sleeping is not a passive activity characterized by absence of activity but quite the opposite, sleep is a time of great brain activity. Although when we see someone sleeping it seems that "he is doing nothing", inside many things happen: there is great brain activity involving mechanisms at the hormonal level, metabolic, biochemical... that are essential to achieve a physical and chemical balance That helps us to maintain a correct diurnal functioning, as well as the segregation of different substances that allow us to continue with our growth and general homeostasis.

Sleep is not a homogeneous process but is characterized by two phases: REM sleep, which in turn is divided into 4 phases, and REM sleep.

The sleep cycle consists of the set of 4 phases of REM and

REM; the two types of dream: REM and REM sleep alternate every 70 to 100 minutes, with an average of 90 minutes. A cycle lasts approximately between 90 and 120 minutes and it is repeated 4 - 5 times each night. In the first half of the night the phases of deep sleep predominate, guaranteeing a deep rest, and in the second half phases 2 and REM predominate.

Sleep disorders are characterized by an alteration of normal sleep cycles. Some sleep disorders can be very serious and interfere with the physical, mental and emotional functioning of the individual, hence the importance of their diagnosis and early treatment.

Its origin is very varied, sometimes they appear as an effect of other diseases and others, are risk factors that favor the appearance of other pathologies. They can be caused by psychological or emotional reasons, be the consequence of other medical diseases or also, be due to the consumption of certain drugs or toxic substances.

In Psychiatry it is common for sleep disorders to cause psychopathological decompensations in patients suffering from psychotic disorders or affective disorders, and also in daily clinical practice, anxiety and irritability are observed to increase when there is no restful sleep.

Poor nighttime rest may lead to daytime hypersomnolence the following day, decreased attention, impaired memory and concentration, mood disturbances, decreased

tolerance to frustration, decreased work performance. In addition to these Psychological consequences, it also has physical consequences such as increased blood pressure, fatigue, decreased defenses... also being a direct cause of traffic accidents and/or work accidents in many people.

Some previous studies have revealed a relationship between poor nighttime rest and psychopathological alterations that condition poor functioning, for example: Specific sleep disorders in Personality Limit Disorder seem to be related to different dimensions of psychopathological functioning and may have harmful consequences on affection and the cognition of the vigil [1]; Insomnia has been linked to suicide [2]; Poor sleep quality adversely affects memory performance, and working memory in particular [3]; Another study has also revealed that insomnia can be a relapse factor in drug use [4].

These are just a few examples illustrating the importance of day-to-day sleep and its multiple repercussions at the psychopathological level. Therefore, good sleep exploration should be performed in all patients since early detection of sleep disorders can prevent their chronicity and the repercussions of such couples as loss of function, work-related accidents, mnesic failures, somatic diseases.

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